ATTORNEY'S DOCKET NO.:	133630-0001						
DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION							
low named inventor, I herby declare that:							

As a below named inventor, I

My residence, post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

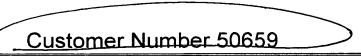
## POST-OPERATIVE VEST

the specification of which:						
was filed on	May 27, 2005	as				
Application Serial	No. <u>10/536815</u>					
and was amended	f on(if applicable)	·				
including the claims, as am I acknowledge the accordance with Title 37, C I hereby claim for application(s) for patent of	ended by any amendment e duty to disclose informa dode of Federal Regulations preign priority benefits un or inventor's certificate li	referred to above.  tion which is material to pass, §1.56.  Inder Title 35, United State  sted below and have also	ne above-identified specification, atentability of this application in es Code, §119, of any foreign o identified below any foreign e application on which priority is			
PRIOR FOREIGN	APPLICATION(S)		<b>Priority Claimed</b>			
0227838.0 (Number)	GB (Country)	29/11/2002 (Day/Month/Year Filed)	[X] [] Yes No			
PCT/IB2002/0063 (Number)	95 WO (Country)	27/11/2003 (Day/Month/Year Filed)	[X] [] Yes No			
I hereby claim the benefit under Title 35, United States Code, §120, of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information material to patentability as defined in Title 37, Code of Federal Regulations, §1.56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application.						
(Application Serial No.)	(Filing Date)	(Status)	(patented, pending, abandoned)			
(Application Serial No.)	(Filing Date)	(Status)	(patented, pending, abandoned)			
I hereby claim the application(s) listed below.	benefit under Title 35, Un	ited States Code, §119(e),	of any United States provisional			
(Application Serial No.)	(Filing Date)					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the						

As a named inventor, I hereby appoint the attorney(s) associated with the following Customer Number to prosecute this application and transact all business in the Patent and Trademark Office connected therewith with full power of substitution and revocation.

000132702/0145/627124-1

validity of the application or any patent issued thereon.



SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO:

CUSTOMER NO. 50659

Michael L. Flynn Butzel Long, P.C. 100 Bloomfield Hills Pkwy, Suite 200 Bloomfield Hills, MI 48304

Michael L. Flynn Telephone: (248) 593-3019 Facsimile: (248) 258-1439

	Full name of sole inventor:	Doris Hjorth Hansen			
	Residence:	Casale Nassio Sopra 15, I-10010 C	Chiaverano, Italy	17X_	
100	Citizenship:	Denmark			
	Post Office Address:	Same as residence			
	Inventor's Signature:	15 / Mustu Date:	Aug 20	- 2005	